256 ² 217 ⁻⁷ʸᵖ	POSITION	INITIALS	ID NO.	DATE
	FEE DETERMINATION	_(signature)_		10/01/99
	O.I.P.E. CLASSIFIER		49	11/5/99
	FORMALITY REVIEW	CM	71632	11/10/99
		CM/BD 71632 / 60959		4-26-00

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
−	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date									
Final	Original	12/1f/00	3/28/03	5/22/03	10/7/03						
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If more than 150 claims or 10 actions
staple additional sheet here